SERIAL NO. FILING DATE applicant(s) **CLAIMS ONLY** CLAIMS AFTER 1st AMENDMENT AS FILED AFTER 2nd AMENDMENT DEP. IND. IND. DEP. IND. DEP. IND. DEP. ND. DEP. DID. DEP. **/16** 66. 26 ' 1--TOTAL IND. TOTAL IND. _1 _1 TOTAL DEP. TOTAL DEP. TOTAL CLAIMS

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